Issuer's Monthly **Summary Report**

U.S. Department of Housing and Urban Development

OMB Approval No. 2503-0004 (Exp. 7/31/2004)

Government National Mortgage Association

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

The information is required by Sec. 306(g) of the National Housing Act or by Ginnie Mae Handbook 5500.3

The ini	ormatior	i is requ	ired by s	sec. 306(g) (or the Matio	nai nous	ing Act of by	/ Ginnie	e iviae na	andbook 5500.3.			
Issuer (Name, Address and Zip Code)									ssion Ty _l	ре	This report is only for Ginnie Mae I Pools Ginnie Mae II Pools/Loan Pkgs.		
									Original	Report			
									Revised	Report			
									/////		<u> </u>		
Number of Pools and Loan Pkgs. Date Reporting Month									Issuer II	D Number	Issuer RPB Report ID Number		
				1					I		1		
(1) Ins	tallments	s Delinqı	uent Con	solidated Su	mmary of A	II Pools/L	oan Package	es			(2) Total Escrow	Funds	
Total		Total		Percent	Installm One	nents Deli Two	inquent Three	Fore	eclosure	Percent 2 or More Months			
No. of Mortgages		No. Delinquent		Delinquent		TWO	or More	1 0.00,000,00		Delin. Excluding Foreclosures	(3) Total Funds (Other Than Escrow	
	.gages	Delinic	luein							1 01001030103			
			1										
	(Report Balances this monthend and Pri this monthend shown on For									Due Holders			
	Tot			Total		l Fixed				Total Security	Total	Total	
	Guar Fe			ortgages		allment ontrol		Pkg. Princip Balance		Principal Balance	Principal	Interest	
	(4			(5)	(6)			(7)		(8)	(9)	(10)	
Total													
Ginnie	Mae I Is	suers C	nlv					Ginnie	Mae II I	ssuers Only			
Ginnie Mae I Issuers Only Date all checks mailed or funds electronically remitted to holders last month (Ginnie Mae I only)										e and Address)	Account Number		
(Girinie i	viae i oniy	')											
All Issu Authoriz	i ers ed Signat	ure						Printed	Name				
		-							-				
Title									Phone Number (Include Area Code)				
D ! -				f	fa		hausin !		. al !u	h Farm IIID 4474	A managed to the cost		
				ty that the in te to the bes				ontaine	ea in eac	::: Form HUD-11/1(O-A report in hard co	py form or electronic	

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)